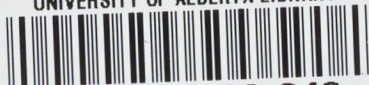


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**Ninth
Annual**



Progress Report

**Period:
January 1, 1962
December 31, 1962**

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1962

**ALCOHOLISM
FOUNDATION OF ALBERTA**

Administrative Centre: 9929 - 103 Street, Edmonton

Ex LIBRIS UNIVERSITATIS ALBERTAENSIS



The Alcoholics Anonymous Societies Act of 1955, Provincial Administrative Offices. A second Clinic began in 1960. Referral Centre

The Foundation was established by provincial and municipal governments, companies, and individuals in Edmonton and Calgary. It maintains broad-based support. The goal of these programs is to help the alcoholic achieve a goal of these programs.

A nominal fee for examination, if prescribed, is charged. Assistance may be provided if a patient demonstrates financial need. There is no charge for medical services, employers, or any collateral contacts.

ated under the Provincial Administrative Offices. A second Clinic began in 1960. Referral Centre

ported by provincial and municipal governments, companies, and individuals in Edmonton and Calgary. It maintains broad-based support. The goal of these programs is to help the alcoholic achieve a goal of these programs.

covers medical services, if prescribed, and welfare services. In no case is there a charge for medical services, employers, friends, or any collateral contacts.

The Foundation operates as a completely separate entity from Alcoholics Anonymous, but it works to achieve results conjunctively with this fellowship.

Detailed information on Foundation activities, services and supplementary reports are available in other Foundation publications.

THE ALCOHOLISM FOUNDATION OF ALBERTA

Provincial Administrative Offices
9929 - 103rd Street
Edmonton
424-1141

TREATMENT CENTRES

CALGARY CLINIC
737 - 13th Avenue, S.W.
AMherst 9-6101

EDMONTON CLINIC
9910 - 103rd Street
424-7161

RED DEER CONSULTATION CLINIC
Red Deer Municipal Hospital
346-3321

GRANDE PRAIRIE CONSULTATION CLINIC
Grande Prairie Health Unit
532-2477

LIBRARY
UNIVERSITY OF ALBERTA

To:

Mr. M. E. Stewart, President
The Alcoholism Foundation of Alberta
Edmonton, Alberta

Dear Sir:

It is my privilege to present the Ninth Annual Progress Report on the activities of The Alcoholism Foundation of Alberta to the Membership and Board of The Foundation.

Reviewing the services of The Foundation for the calendar year January 1, 1962, through December 31, 1962, this is an interim report only, preparatory to the publication of the 10th Anniversary Review. It must be remembered that The Foundation was begun in 1948, incorporated in 1951, with services getting under way in 1953.

Respectfully submitted,

J. George Strachan
Executive Director

April 1, 1963

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THE ALCOHOLISM FOUNDATION OF ALBERTA

PRESIDENT'S REPORT

It is a very real pleasure for me to report to the members and friends of The Foundation. Perhaps I should more correctly say that it is a pleasure for me to greet the members and friends of The Foundation. I shall leave the reporting to the Executive Director and his staff who are much better equipped than I to tell you about our burgeoning program.

This is our tenth year of operation—an important anniversary and milestone in the life of your Foundation. Perhaps we could say that The Foundation is about to come of age; certainly the response to our program during this last year must signify a new level of recognition of the alcoholism illness as the scourge that it is, and of The Foundation's efforts to combat this costly and widespread socio-medical problem.

Later in 1963, it is our intention to convene a special anniversary meeting which will be given over to a review of our history and a forecast of the future. We will endeavour to make it an interesting and challenging meeting, and hope that you will be with us at that time.

Ours is a two-pronged program: treatment and prevention. All too often we tend to play up the treatment side because this activity seems to strike at the problem where it exists. It is also perhaps more glamorous than are the preventive activities.

We delude ourselves in this; the key to solving the desperately difficult problem of alcoholism is not treatment, it is prevention.

The Red Cross is fond of saying that it is better to build a fence at the top of the precipice than to fix broken bones at the bottom. I believe this with all my heart. Our Foundation spends too much money proportionally on treatment and not enough on preventive activities. This does not mean that we should cut back on our treat-

ment facilities; these are overtaxed and in need of reinforcement. What it indicates is that we must find the means to increase our commitment to education, to community activities and to research.

This, of course, brings us up against the constantly difficult problem of adequate funds for our work. The support given The Foundation by the Provincial Government has been, and is, tremendous, and is very much appreciated. But either it must be increased, and increased substantially, or funds must be found elsewhere for our work.

This is not an easy subject to discuss. We receive good support from the communities of Calgary and Edmonton through their respective United Community Funds; we receive encouraging support from certain friends and from our members. We do not receive adequate support from the Federal Government, nor from the Municipal Corporations, particularly of Calgary and Edmonton where the bulk of our work is performed. Perhaps the fault for this lies with us; perhaps we have somehow failed to explain our need for support to these two levels of Government.

I do not propose to labor this point. We need fully-integrated support. Our work must have further financial assistance. We are running a fine program, second to none on the North American continent. We operate an efficient, skillful, conscientious agency performing a tremendously valuable piece of work for the citizens of Alberta.

This has been a year of great change for The Foundation. We have lost a number of senior staff and acquired others. Most recently, we regret the loss of Mr. A. W. Fraser who had served The Foundation so well.

We have undertaken a good deal of reorganization which your Executive

Committee feels will result in a stronger, more flexible organization.

A special word about George Strachan. In Mr. Strachan we have an Executive Director known all over the world for his interest in and knowledge of the field of alcoholism. During the last year, he and we were honored by the invitation extended to him to present a paper at the European Institute for the Prevention and Treatment of Alcoholism.

I trust that the detailed reports which follow will give you a complete

appreciation of our work during the past year.

May I, on my own behalf and yours, express to the Executive Committee, to the Board of Directors, to our inimitable Executive Director, to all of the Staff, to the Provincial Government, to Premier Manning, to Dr. J. Donovan Ross, and to a host of supporters, friends and members, thanks for assistance, encouragement, co-operation and hard work, as each may apply.

M. E. Stewart

EXECUTIVE DIRECTOR'S REPORT

A comprehensive outline of all 1962 Foundation activities follows in ensuing reports, and as a more detailed review is now in process of preparation covering the first ten years of The Foundation's work, it is sufficient to say that the demand on all Foundation services continues to grow. We are hard pressed, indeed, to maintain the quality of service which we feel is the basis of the reputation we enjoy in this field.

As ensuing tables will indicate individual services, perhaps I can better emphasize the magnitude of our growth by having you note the following table of statistics, which provides a comparison of our activities, as applicable to all departments during the recently closed first quarter of our new fiscal year 1963-1964, as against the first quarter of the fiscal year just past, January through March of 1962, for the Edmonton Centre.

EDMONTON CENTRE	1ST QTR. 1962	1ST QTR. 1963	1963/1962 CHANGE
Total files opened	99	158	+ 60%
New applicants opened	79	132	+ 67%
Reopened applicants and cases	34	45	+ 32%
Counselling interviews	1293	1820	+ 41%
Medical interviews	448	983	+ 119%
Group therapy sessions	59	214	+ 263%
Group therapy attendance	812	2246	+ 177%
Educational activities	32	42	+ 31%

Total files opened—inception to date—over 6500, for Alberta.

Enquiries: 1362, Applicants: 2566, Cases: 2286, plus over 300 first quarter this year.

The vacuum that existed around the problem of alcohol is slowly but definitely being dispelled. In fact, the people in our Province including the professions, Government, private management and other lay interests are much more interested than we sometimes realize. They are also much more willing "to do something" than we may give them credit for. It is no longer necessary, at least in Alberta, for us to be on the defensive and to try to prove that a problem exists, or its magnitude, or that, co-operatively, something can be done. Nevertheless we must remember that this is a general statement and that there still exist pockets of the old misinformation and prejudice that must be made aware of the worth of a more progressive and enlightened approach to the problems of alcoholism.

The matter of the magnitude of this problem is something that we must

seriously question. Today the best yardstick that we may use is that of the Jellinek formula, which, if applied to the population of Alberta in 1961, would give us a minimal estimate of approximately 12,000 alcoholics with complications. Additionally, we know that we have many people in progressive stages of alcoholism—probably to a total of about 30,000.

For just a moment, however, let us analyse that which we are doing. The Foundation, throughout the Province, has opened a total of approximately 6,500 files as of the first of April, 1963. The Belmont Rehabilitation Centre has processed over 3,500 offenders, of whom the majority may be assumed to have an alcoholic problem. Other agencies active in the field of service to alcoholics have accumulated additional numbers, estimated by some to total in excess of 10,000. We know, too, that there are problem drinking

situations being treated in our Provincial institutions, and that many are in courts, jails, etc. Mind you, of all of the above, many are no doubt repetitive as there are multiple admissions to Belmont, the courts, jails, etc. Nevertheless, as anyone can see, the total involved is in excess of minimal estimates. At the same time, we well know that we are still dealing with only a fractional percentage as most problem drinking cases are among the hidden problems of our society and are never being approached.

One continuing difficulty in discussions on problems of alcohol, particularly, I believe, on alcoholism as perhaps the major problem of alcohol, is the matter of language. Thus studies are in process now both here and elsewhere to attempt to establish a nomenclature and a basis of statistics that is meaningful to all. There abounds considerable confusion in individual interpretation within the alcohol language. For example, to some "alcoholic" and "problem drinker" and "drunk" and "inebriate" mean the same. To others, they have very individual meanings. The word "temperance" means different things to different people, therefore, as we strive to continue to improve a working climate and a healthy atmosphere in which to deal with alcoholism, we must begin to define one to another just what we are talking about. There are even serious differences of opinion on the definition of alcoholism as a disease or as a symptom—as a physical or as an emotional disorder—which differences tend to mitigate other serious aspects, namely those problems that are social or spiritual. Being aware of these differences and even prejudices, perhaps we can work toward a common denominator of understanding, realizing again, of course, that connotations and semantics will continue to play their individual roles.

The studies that we do, certainly magnify all that we must still learn. But, we must recognize that we are learning a good deal and now need to better utilize the knowledge available to us and to integrate this knowledge into the other academic and working streams of our society, in order that we will have a common understanding as we begin to attract and enjoin more forces to work together for solutions and prevention.

REORGANIZATION OF FOUNDATION DEPARTMENTS

We have reconstructed the basic concept of The Foundation to provide better administration and communications, and to streamline, as far as possible, the administration of all Foundation departmental activities. This will enable us to better utilize available staff since we have not been able to immediately replace some of those key personnel lost this year and the previous year, and since too, of necessity, all of our personnel are constantly engaged in activities in other departments and so overlap one with the other. For example, research people assist in educational activities and in providing both public general information as well as in aiding with some professional training. Some education staff also assist with some treatment services, and both Mr. Matheson and myself must continue to provide personal assistance in all areas of our work. It is a fundamental policy with us to orientate and train all of our educational staff in our treatment services so that they are constantly aware of and able to assist with those treatment needs which arise out of every type of contact service that we render. This furthers and retains the philosophy of our remedial approach which continues to emphasize the importance of our treatment services.

In this reorganization of our structure, we now point up the two essential areas of our work which are:

(a) **Treatment Services:** These include all of the medical and counselling services, individual and group, that we maintain for all patients. As you will see from the statistics above, as our treatment load and referrals increase and as we better integrate the philosophy of our treatment care for the alcoholic within the total community, we now must deal with not only more patients but with more families, spouses and children, and their other collaterals: the employer, the doctor, the clergyman, social agency, etc. Hence our group work now includes especial groups for the children of alcoholic parents and, of course, for the patient and his or her spouse.

Treatment can also begin in a hospital setting or in an institution where the patient may be hospitalized with injury or other illness, in a TB sanatorium, veterans' hospital, mental institution, etc. Here, as a result of our contact work, we sometimes initiate beginning treatment services. We anticipate an even greater growth as we now look forward to a more objective rehabilitative program for those people being sent to custodial institutions.

(b) Preventive Services: As you will note above, one cannot discuss treatment without discussing areas of education at the same time. Since our inception, we have continued to emphasize the need to maintain an "overall approach" to the problems of alcohol, and particularly alcoholism, because each segment of our people must progress in awareness, knowledge and understanding simultaneously with the other because each professional and lay contact plays a vital role.

This is true in any area of public health, but is especially so with alcoholism. Therefore, general information, public education, school education for teachers and students, a professional training and orientation program, the development of community services, publication of materials, the establishment of a staff and community library, the initiation of research or studies and evaluation either of that which we are doing or of other possible new areas of interest are each a means of achieving some degree of interest and even direct prevention. This, therefore, is the basis of our approach, structurally, within The Foundation.

Additionally, we have divided our Province into two main areas—the one centered around our Clinic and Centre in Edmonton and the other about our Calgary Centre and Clinic. By working out of these two major centres we are enabled to reach more people more economically. Experience has already taught us that in the smaller communities we cannot provide a meaningful or economical treatment service, but we can and must maintain continuing educational service to every facet of those communities. This was demonstrated to us particularly in the Westlock-Barrhead area where we carried on for a pilot period and in which we made available, on a regular weekly

basis, some members of our treatment staff. We learned that people in these communities, when aware of our facility, would seek help in Edmonton but would not usually seek help in their own community where they know each other too well.

We are, therefore, carefully assessing those activities which we are carrying on in Lethbridge, Medicine Hat, Red Deer and in Grande Prairie for the Peace River block. Again, as staff are well trained in several departmental responsibilities they can easily overlap in providing the services required in these communities on a reasonable basis. Key personnel from both regions meet regularly to co-ordinate their plans and activities and to evaluate results.

RESEARCH, PUBLICATIONS, LIBRARY

These are particularly important areas of activity and may I just say that we have made the progress that we wished. Our publications continue to receive commendation and acceptance. Several especial reports have been very widely read and used. Our library is now serving as an excellent available resource to students and professional workers, and we are attracting and utilizing many fine students from several faculties within the University. We have fitted a library into our Calgary unit so that it can serve the University faculty and the professional people and students in our southern region. This year we expect to subsidize some twelve to fifteen students through summer projects in work useful to us and to them. We have many students and professional workers now involved in related alcohol studies in the hospitals and at the University, both in Edmonton and Calgary. These will grow as the means are available to utilize their services and as staff are available to supervise their work.

PERSONNEL

We have not had too many radical changes in personnel this year. We have lost one of our original staff members, Allon W. Fraser, with whom

all of us were very close as an associate and co-worker. Fortunately, he remains in touch with this field and will continue to maintain an interest through other sources in related activities. Personnel in all departments have been strengthened. We have one of the finest working units in some years, even though we did not, for purposes of consolidation and economy, immediately replace some of the key personnel as department heads, whom we had lost in the last two years. We have some eminently fine people joining our Foundation in the new year, from and about whom you will be hearing in the very early future.

At this time an especial word of appreciation is due to the continuing assistance we have had from the Provincial Department of Health, from the Alberta Hotel Association and the Alberta Brewers' Agents for grants which they have made available to us to make possible the furthering of personnel studies, research projects with students and other activities which could not otherwise have been undertaken. I cannot tell you how much we appreciate the stimulus this has provided to all of us in The Foundation, to know that we can rely on these resources as we have throughout all these years. It is unfortunate that we cannot achieve the same consideration as yet from our Federal Government, some of our municipalities and from other private foundations. Their support is urgently needed in this whole area of preventive services, to attract and train people, and to further research which alone will enable us one day to possibly achieve real prevention.

FINANCING

Although we have not achieved as stable a position as we had anticipated in the revenues we sought, and though tremendous demands for increased services have necessitated more expenditures than we quite wished to make in this past year, we do close the year in a relatively sound state. We are, however, faced with some very real problems in ensuing years if we are to maintain the quality and quantity of work that we do in every department. However, as planned, we did

consolidate our activities and did realign our personnel and now, as our physical structures are completed, we can, we believe, more objectively review our needs and examine the resources available to us. This is one of the more severe tasks facing your Executive Committee in these ensuing months.

REHABILITATIVE SERVICES

The absence of long-term care for some especial kinds of alcoholic patients will now, we believe, be overcome with the advent of the reorganization of the rehabilitative program carried on by our Provincial Government within the Attorney-General's Department. A good beginning has been made in our jails, rehabilitation centres, mental institutions and general hospitals. However, more needs to be done. Fortunately that orientation and education which we have conducted in this area is now providing these collateral agents with a more knowledgeable and understanding viewpoint. Discussions have been held with those hospitals planning an extension of their services and most are favourably impressed by that which can be done, and they are planning more co-operative measures with The Foundation.

All of us can easily criticize that which goes on but all of us must continue to remember the newness of activity in this field. We cannot learn everything overnight so we cannot do everything overnight, however, that which we do have in Alberta functions excellently. As now we can plan for a more co-ordinated and unified approach we will, as I have so often said, better utilize the wherewithall to achieve a program second to none.

When we consider rehabilitative care, we should determine the illness implications in the revolving concept of treatment, the continuing broad and individualized education of the public, the patients and their collaterals, while maintaining both modest and realistic goals. We must ever be cognizant of that contribution which can be made through research with both immediate and long-term levels and concepts and we must never for-

get the spiritual aspects of treatment in a total, overall approach.

As we therefore realign our initial prospectus for this next period, and as we plan to better deal with problem drinking situations in alcoholism and the related problems of alcohol, we must recognize (a) again that alcoholism is but one of the problems of alcohol; (b) that there are many types of **ALCOHOLISMS**; (c) that in our remedial approach we must realize that there is no single answer to each of these types of problems—therefore we must be comprehensive in our methods and try ever to maintain a single-mindedness of guidance and direction.

It is also necessary to recognize that there is a possible relationship of other addictions to alcohol. This being the case, your Executive has been aware of the need for us to look into our responsibility in the field of other addictions. We have therefore quietly begun to assess the problem in our Province. We are presently treating some patients with dual addictions and realize that these other addictions require special knowledge and techniques for their control.

NATIONAL AND INTERNATIONAL ACTIVITIES

In scarcely nine years of operation The Alcoholism Foundation of Alberta has achieved international recognition. This fact was amply demonstrated in the reception accorded to your Director by the sponsors and delegates of the International Union Against Alcoholism in Warsaw, Poland, during their June 11-22 meetings last year.

I left Edmonton May 16th and, in the course of a crowded two-month itinerary, covered a goodly number of North America's, Britain's, and Western Europe's leading alcoholism treatment and programming centres. In Warsaw, I delivered a comprehensive and detailed paper on 'The Administration of a Program Against Alcoholism', with special emphasis on the role and aims of Education, in terms of its development, application, and its empirical evaluation by The Foundation.

Your Director continued his activities on the national and international scene

by remaining active in The North American Association of Alcoholism Programs, as Secretary to the Canadian Council and in all other activities that would provide a source of continuing communications and information to improve the role of this Foundation.

The Director co-operated with other members of the Canadian Council to further spur on the development of the Canadian Foundation which had its organizational meeting in Toronto in December.

Liaison meetings were continued with the staff of General Service Offices of Alcoholics Anonymous and with the National Council on Alcoholism.

PREPARATORY PLANS FOR THE FUTURE

Last year I reported on the very fine boost that was given to our physical facilities through the generous support of the Provincial Government. It is gratifying to note that in January our Board formally opened the splendid addition to the Calgary Centre. This will enable us to accept and prepare for an anticipated expansion of demand in that area.

Unfortunately, we recently had a fire in the building in which our Lethbridge services were quartered. This, however, has been resolved and we are perhaps better situated now and better able to plan for an expansion of our activities there. We plan to augment the skeleton staff to include some treatment personnel and to also carry on and broaden our educational activities throughout the southern area of our Province.

We are getting well settled into the Provincial Administrative Centre in Edmonton which also houses all educational and research personnel, our publications department and our library. We will shortly have full use of the building as that portion now under temporary lease will soon be vacated and will provide us with the additional space required for the ever-growing number of group and educational activities. This will also make space available for part-time and student personnel. This is an im-

portant aspect of our work as you will see in departmental reports covering the advisory and professional training services which have developed to such magnitude.

Renovations to the Edmonton Clinic are in process of completion. These were begun some time ago and delayed by the unavailability of materials and equipment. Consideration is being given by the Government to such other physical needs as we may have.

CONCLUSION

The Administrator must recognize and utilize every possible helpful ally, counselling resource and available collateral aid, professional or lay, in seeking to provide the quality and quantity of service necessary to deal with the ever-increasing demands made upon use as awareness, knowledge and understanding is implanted through the treatment and preventive services of The Foundation. We must also be prepared to anticipate and deal with the new responsibilities we create and to service the needs of those people who, through these media, begin logically to seek our help. Many of these resources can also be found among stable, recovered alcoholics. Much of the strength that we enjoy and the progress that I believe we are making is in no small measure due to that support which they are already providing. Our rapport with all professional bodies continues to improve, just as we have continuing co-operation from other related groups such as the Alberta Liquor Control Board, Temperance Associations and health and welfare bodies in other fields. We are most appreciative of their contributions to our success and progress.

As you know, we are ever mindful in our Foundation of the things we owe to those with whom we work so closely. These now include, as before, the police, the press, radio, TV, commun-

ity leaders, the agencies, business and industry and many others too numerous to name.

We would again note a particular word of appreciation for the co-operation received from the fellowship of Alcoholics Anonymous. They render a continuing service without which The Foundation could not easily function.

Some years ago this Foundation saw fit to assist the United Church in the development of special hostels. The first of these opened in Edmonton in the spring of 1959, and the second in Calgary in the fall of 1961. These have served an admirable purpose and have provided residential care for a selective group of people requiring such aid. It is gratifying to note that this initial pilot effort carried on for this demonstration period will now serve to provide the stimulus necessary for the establishment of similar hostels in other areas of Canada. These hostels offer non-sectarian aid to referrals from The Foundation and other sources. The continuing co-ordination and co-operation from these hostels has again served a very excellent role.

Again, too, no report would be complete without a final word of gratitude and thanks to the members of my Executive Committee who have worked so very closely with me and our staff, and who have this year helped to bear a more than usual burden in helping us measure up to the increasing demands made upon us. Therefore, to Murray Stewart, Don Macdonald, Stewart Keays, John McGuckin and George Crawford, my very personal thanks. And, to this grand staff of ours, who give their all, there aren't the right words, but to them I do give my very heartfelt thanks.

With this review we look forward with anticipation to the celebration soon of ten years of continuing and gratifying progress with the people of Alberta.

J. George Strachan

TREATMENT ACTIVITIES

MEDICAL SERVICES

The Foundation's Medical Services continue to play an integrated role in the treatment of all patients—from intake through the entire continuum of psycho-social therapy.

During the year, 388 new patients received medical care, and a total of 2,776 interviews were conducted by staff doctors and nurses. This represents an increase of 14% and 25% respectively over corresponding medical services rendered in 1961.

In addition to direct patient service, medical personnel continue to participate in orientation lectures involving medical students, nurses and others entering the profession. A fourth year medical student was again employed to advantage during the summer period, and the success of this plan indicates that more and varied assistance will be offered in 1963.

COUNSELLING ACTIVITIES

The steadily increasing demand for treatment services required the addition, early in 1962, of one counsellor at each of the major clinics, and the opening of part-time clinics at Red Deer and Westlock. At year-end the distribution throughout the Province of clinical services was as follows:

Major Out-patient Clinics—
Edmonton and Calgary

Information and Referral Centre—
Lethbridge

Part-time Clinics—Grande Prairie,
Medicine Hat, Red Deer and
Westlock

To accommodate the growing numbers of patients, both applying for and remaining in treatment, procedures have had to be modified in the direction of increasing use of Group Therapy. Impressionistic evaluation of these modifications gives us no reason

to believe that patient response to treatment has been adversely affected; in fact it is evident that one section of the patient body is remaining considerably longer in treatment contact, presumably as a result of increased involvement in group sessions.

Intake and Interview Figures

The number of new and re-activated patients seen in 1962, and the number of counselling interviews carried out during the year, show a substantial increase over 1961.

Number of new patients seen:

Edmonton	325
Calgary	233
Other Centres	57

Number of re-activated patients:

Edmonton	138
Calgary	115
Other Centres	19

TOTAL 887

Counselling Interviews

Edmonton	5,048
Calgary	3,794
Other Centres	691

TOTAL 9,533

GROUP THERAPY

Increased use of group techniques at the major clinics was noted in our 1961 Report. This trend continued in 1962 with the customary inclusion of spouses in the Initial, Intermediate and Advanced group sessions. These groups are conducted in the evenings. Day groups were instituted at the Edmonton clinic in the late spring of 1962. Attendance at these groups is restricted to patients, and their response and attendance has been well sustained throughout the year.

The building which houses the Calgary clinic was renovated and the accompanying disturbance delayed some of the group therapy work.

Group Therapy Attendance

	EDMONTON	CALGARY
Initial Groups --	1,338	1,066
Intermediate Groups -----	947	636
Advanced Groups	626	234
Day Groups ---	1,991	—
Wives' Groups -	36	—
	<hr/> 4,938	<hr/> 1,936
	LACOMBE	RED DEER
	141	49

RECOVERY TRENDS

Patient progress following treatment remains substantially the same as that found in previous Annual Reports, e.g.:

Recovery indicated -----	26%
Improved -----	29%
No Recovery indicated --	33%
Under Active Treatment --	12%

These estimates are based on follow-up of patients who have undergone

an arbitrary minimum of four counselling sessions, (i.e. 'cases'). A measure of recovery is known to occur among those patients with less than this minimum of treatment contact (i.e. 'applicants') but it is Foundation policy to assess and report progress of only those patients who have attained 'case status'.

PATIENT CHARACTERISTICS

Patient characteristics in 1962 show little variation from the 1953-61 means. The proportion of married and employed patients has again, this year, increased slightly, but no other changes are notable.

The following table shows the 1962 patient characteristics as compared with the 1953-61 means:

Patient statistics, all centres combined, 1962 and inception to date:

		1962	1953/1961
Total patients treated ('applicants' and 'cases')		615	4,673
Total files opened (includes 'enquiries')		960	6,214
		<hr/> %	<hr/> %
Sex	Male (549)	89.3	90.5
	Female (66)	10.7	9.5
Mean Age	Male	39.4 yrs.	39.6 yrs.
	Female	39.2 yrs.	38.3 yrs.
Race	White	97.9	97.3
	None-white	2.1	2.7
Religion	Protestant	68.8	70.5
	Roman Catholic	29.9	27.9
	Other	1.3	1.6
Marital	Single	14.2	18.7
	Married	60.6	56.4
	Divorced/Separated	21.4	22.1
	Widowed	3.8	2.8
Employment	Employed	59.0	53.5
	Unemployed	41.0	46.5
Drinking History	Years drinking	20.1	18.9
	Years a problem	8.4	7.8
Referral Sources		<hr/> %	<hr/> %
General Publicity		21.0	19.2
AA		17.5	21.3
A.F.A. Patients		17.8	17.6
Employer/Supervisor		2.1	3.5
Medical		16.9	16.1
Clergy		4.6	4.1
Legal		2.1	2.1
Agency		10.4	11.6
Penal		0.4	0.5
Other		7.2	4.0



**Ninth
Annual**

**Progress
Report**

SUMMARY

**Period:
January 1, 1962
December 31, 1962**

**THE ALCOHOLISM
FOUNDATION OF ALBERTA**

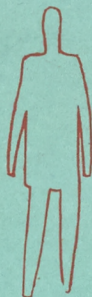
Provincial Administrative Centre: 9929 - 103 Street, Edmonton

1962

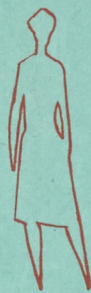
A SUMMARY OF THE THE ALCOHOLISM FOUNDATION



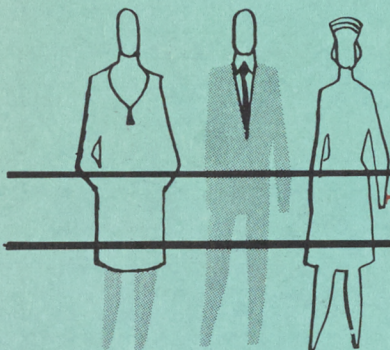
615 NEW PATIENTS



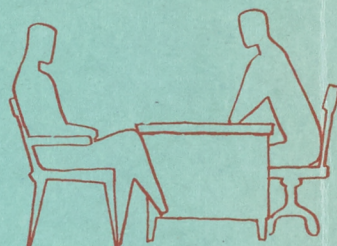
549



66



TREATMENT



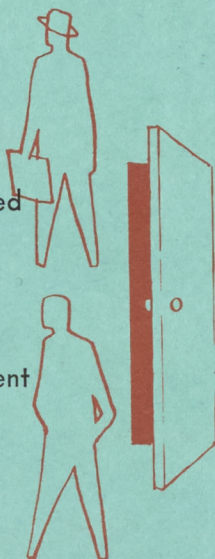
9,533 INTERVIEWS

PROGRESS TRENDS 1953 - 62

Recovered or Improved
55%

Unimproved
33%

Under Active Treatment
12%

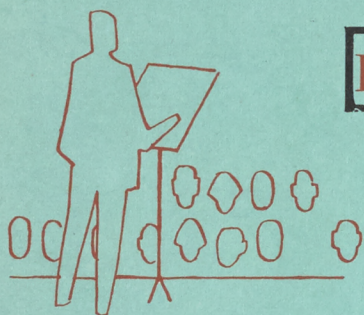


657 GROUP THERAPY
SESSIONS

THE YEAR'S ACTIVITIES

FOUNDATION OF ALBERTA

1962



306 PUBLIC TALKS, MEETINGS
AND SEMINARS
7,700 ATTENDANCE

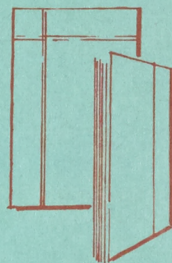
EDUCATION



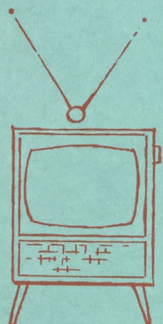
25,809 PIECES OF LITERATURE
DISTRIBUTED



SOCIAL AGENCIES
CHURCHES
DOCTORS
NURSES
INDUSTRY
SCHOOLS
MAGISTRATES
POLICE
GENERAL PUBLIC



24,967 PERIODICALS
DISTRIBUTED

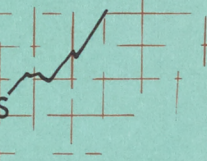


RADIO & TV PROGRAMS

RESEARCH

COMPLETED AND CONTINUING STUDIES

e.g. Skid Row Delineation
Male Drinking Patterns
Causes of Patient Death
Distribution of Consumption Outlets
Social Perception of Female Patients
Beverage Alcohol Sales and Consumption
Drinking Problems in an Ethnic Minority
Confiscation of Liquor and Interdiction
CPI Characteristics of Recovered Patients



Application for Membership in THE ALCOHOLISM FOUNDATION OF ALBERTA

By becoming a member of The Alcoholism Foundation of Alberta, you can actively support its work of treatment, education and research. Any person who donates five dollars or more, in cash or services, becomes a member. Members receive all Foundation publications and can vote at all membership meetings. Without membership donations we could not carry out the special educational programs, staff training, or research projects which are so urgently required to reduce this major socio-medical problem.

Please send your donation to one of The Foundation's centres:

Edmonton	Lethbridge	Calgary
9929 - 103 St.	The Glenwood Bldg.	737 - 13 Ave. S.W.
	321 - A6 Street South	

Please enroll me/us as a member of The Alcoholism Foundation of Alberta for twelve months. Enclosed is a membership donation of

\$_____.

Name_____

Company or Group_____

Address_____

Please apply my donation to:

- ☐ General Fund
- ☐ Preventive Services — including
Special Educational Projects
Professional Training
Community Services
- ☐ Research Projects
- ☐ Staff Training

The annual government grant supports the treatment program and much of the educational activities of The Foundation. The essential development of our preventive and research programs, however, does depend on membership donations and the United Community Funds of Edmonton and Calgary.

All membership contributions are tax deductible.



PERSONNEL

Personnel at the Calgary Clinic has remained relatively stable during 1962. Mr. Gordon Bird and Mrs. Mary Anne Dittman joined the counselling staff during the year.

We were fortunate in securing the services of Mrs. Joyce Irvine, a resident of Red Deer and an experienced Social Worker, to operate the part-time clinic in that city.

There were fairly extensive changes in the composition of the Edmonton Clinic staff during this calendar year. Mr. R. J. Frederick was granted leave of absence for further University training. Dr. A. Bolle, who was Senior Psychologist at the Provincial Mental Hospital, joined the Edmonton Clinic staff in January, and then in September returned to his previous work at the Mental Hospital. Mr. John Nickel resigned in September to take a position with the Provincial Probation Service.

Mrs. B. Ferguson, Dr. O. Gironella, Mrs. M. Guay and Mr. A. Dick joined the staff during the year.

Mr. J. McNerney, of our Education Services Department, is currently

attached to the Treatment Department for six months in training.

In September Miss E. Cuthbertson, formerly the Co-ordinator of Group Therapy, transferred from the Treatment to the Education Services Department to accept the appointment of Supervisor of Preventive Services (Northern Region). The responsibility for developing and co-ordinating group therapy activities has been assumed by the clinic supervisors.

Four treatment staff members, two from the Edmonton Centre and two from the Calgary Centre attended the Group Process Institute this summer at Banff and Ponoka. This Institute was considered most valuable to them and increased their effectiveness in dealing with patient groups.

The Director of Treatment toured alcoholism facilities in Vancouver, San Francisco and Los Angeles during the early part of March.

Three staff members attended the Psychiatric Nurses' Institute held in Ponoka in the fall of the year.

Allan W. Fraser

EDUCATIONAL ACTIVITIES

One of the primary educational goals of an alcoholism program is to dispel adverse public attitudes towards the alcoholic, and to promote early recognition of his (or her) condition by all those who live with him, work with him, or treat him in any capacity.

Another equally important goal is the tremendously challenging area of prevention. Some of our most stimulating educational activity is directed towards an effort to reduce the incidence of alcoholism in the forthcoming generation.

Every untreated alcoholic represents a loss to his community in time, money, productivity, responsible parenthood and in many other ways. Some of this tragic loss will never be eradicated, but a comprehensive alcoholism program and an informed public can do a great deal to improve the prospects for the future.

In 1962 we carried on extensive educational activities. Some of these were:

1. Teaching alcoholism in medical and nursing curricula:

Classes were conducted at both centres for nurses, medical students and internes.

2. Seminars on alcohol problems:

Seminars for staff of community agencies and district Medical Health Officers were well attended.

3. Law enforcement groups:

Informative lectures for police on alcohol problems and alcoholism.

4. Industrial programs:

The Foundation maintains interest in helping to formulate programs of prevention, recognition and early treatment measures for any industrial group.

5. Youth groups:

Many requests come in throughout the year for speakers to all kinds of young people's groups.

6. Service clubs and women's groups:

Speakers are frequently requested for general informative talks on alcoholism.

7. Church groups and clergy:

Churches of many denominations continue to show a lively interest in alcohol problems and many groups of clergy have received special instruction.

8. Education—high school and university:

Teaching classes in alcohol problems are being conducted in many high schools and in some university courses. Foundation staff assists in presenting courses or supplying material, as requested.

9. Guidance teachers' seminar:

A seminar on 'Presenting a Program of Alcohol Education' was conducted for Guidance teachers.

10. Community committees and development of local alcoholism programs:

The Foundation is continuing to support local groups throughout the Province who are interested in helping to provide information and treatment services in their area.

11. Mental hospitals:

The Foundation has assisted with staff training and this program will be continued in 1963.

12. Tuberculosis hospitals:

A program was initiated this year for the personnel of the two Alberta sanatoria.

13. Alcoholics Anonymous:

We are continuing to meet requests for speakers, and to provide new literature releases for groups.

14. Publicity:

Radio and TV programs have been interspersed throughout the year and press releases are also used to keep the public informed about alcoholism.

While we are endeavouring to teach, we are, ourselves, learning a good deal about the needs of our urban and rural communities in Alberta, and about the extent and effect of their alcohol problems. We are becoming increasingly aware of the need to establish adequate training programs so that significant persons in our communities are able to recognize alcohol problems and direct individuals to sources of treatment.

More hopefully still, we are learning the value of directing effort and time and experimental activity, towards the reduction of alcoholism by early preventive measures.

The Foundation education and community information program uses every opportunity to alert those who are responsible for shaping the values and behavior of youth to the advantage of reliable, contemporary knowledge about the use and abuse of alcohol in our changing society. We are also encouraging youth groups of all kinds to use our services to equip themselves with information about alcohol and its effects, so that their developing attitudes will be based on adequate knowledge.

A comparison of the years 1961 and 1962 shows that our total educational services have increased more than a third in one year.

In 1963 we hope to continue our program of information and education about alcoholism for lay and professional groups of all kinds, with special emphasis upon alcohol education as it affects the areas of medicine, law enforcement, industry and education.

Increasing public receptiveness is a promising token of the value of The Foundation's role as educator about alcohol and alcoholism.

Effie Cuthbertson

Youth Advisory Committee

The Youth Advisory Committee, currently numbering ten boys and girls, representing various Edmonton Teen organizations, was formed in May,

1961, to establish useful liaison between city youth groups and The Alcoholism Foundation of Alberta.

Subsequent semi-monthly meetings with The Foundation's educational and public relations staff members served to acquaint The Foundation with Teen attitudes on drinking specifically, and on related educational and social problems generally. And by the inevitable process of change and drop-out, these meetings also served to eliminate those members with only casual and transient interests, and have left us with an active, alert and informed group of young people.

Besides functioning in a generally advisory capacity, these boys and girls have helped edit and revise The Foundation's youth pamphlet 'Looking at Alcohol'.

In the fall of 1962, the Youth Advisory Committee undertook an intensive Speakers' Bureau training program, consisting of four weekly three-hour seminars at The Foundation. All members participated in this program under the instruction and guidance of a member of The Foundation's Educational Services Department.

Upon completion of these seminars these boys and girls arranged speaking engagements for themselves in various other Teen groups throughout the city. The Foundation will continue to give them guidance and support in this very worthwhile and expedient undertaking.

Most recently, the Youth Advisory Committee has undertaken, with The Foundation's Research Department, an inquiry into specific areas of teenage drinking behavior. The Committee contributed to the framing of a useful questionnaire in this connection and is assisting the Research Department on a continuing basis in this inquiry.

Slated for the Youth Advisory Committee's next assignment is a plan to produce a pilot (exploratory) film on teenage drinking attitudes. This will be done on 8 mm. film under the direction of Foundation personnel. Its success may lead to other film productions covering the whole area of teen-agers and alcohol.

J. Motyl

PUBLICATIONS, PUBLICITY AND LIBRARY

Regular quarterly issues of PROGRESS were published in March, June, September and December of 1962. The circulation of this magazine has now reached six thousand five hundred, and it continues to increase steadily. During the past two years the number of subscribers receiving PROGRESS rose by approximately one thousand.

Requests from a growing number of organizations and individuals, here and abroad, for reprints of (and permission to reprint) a comprehensive range of PROGRESS articles indicates that the publication is widely read, used and accepted.

Current PROGRESS circulation breaks down into the following categories and approximate percentages: Medicine—26%, Education—22%, Foundation Membership—12%, Business and Industry—10%, Social Agencies—8%, Patients—5%, Churches—5%, Law Enforcement—5%, Libraries—5%, Miscellaneous—2%.

Several new publications were added to The Foundation's general distribution literature. These were reprints from PROGRESS entitled 'Alcoholism,' 'Sobriety,' and 'Wives of Alcoholics.' All three have been well received and several thousand were distributed to patient groups, professional workers and organizations, labor and industrial personnel, and general lay groups.

The initial sections of 'A Handbook on Alcohol and Alcoholism' were completed, printed and assembled. This publication provides the basis for a comprehensive and valuable general reference, especially prepared for professional workers in the alcoholism field, for educators and for local advisory committees working closely with Foundation personnel in rural areas on a province-wide scale.

A guidance and training manual for the use of professional clinical and institutional personnel, aimed especially at the group therapy process, was also compiled in 1962.

Slated for production in 1963, is an illustrated brochure on The Alco-

holism Foundation and the several aspects of its provincial public and professional services: treatment, education and research. A ten-year review of The Foundation's first decade will also be presented in a brochure format in the course of the current year.

In line with The Foundation's general educational principles, a number of other publications will be produced for specific as well as general use. Some of them will be updated and modified versions of existing materials, others will be new productions. The basic determining factors in all such undertakings are utility and authority. The Foundation is constantly on the alert for those elements in its publications which will prove most usefully informative and which are based on the authority of the latest knowledge in this still relatively new and dynamic socio-medical field.

Serving education, as well as the growing general awareness of The Foundation's services in a public relations sense, both the Edmonton and Calgary centres made very successful use of television media in 1962. Edmonton, in co-operation with CBXT, produced a half-hour film entitled 'A Woman Alcoholic,' portraying the case-history of a recovering former Foundation patient. Calgary collaborated with Mount Royal College under the sponsorship of the Hudson's Bay Company, and participated in 'Decision,' a panel discussion inquiring into business and industrial employee problems. Senior staff members of both centres also appeared in several television discussions and panels dealing with both The Foundation's public services and various ramifications of alcoholism.

These relatively new television publicity ventures of The Foundation have been widely noted and commended. Continued and broadening exploitation of this media is anticipated during 1963.

The Foundation has been maintaining and adding to its library new volumes and replacements as necessary. At the present time we have acquired a good representative collec-

tion of modern literature on alcoholism, drinking in various cultures, and the problems of drinking in many areas. We are also subscribing to a variety of professional journals which have relevance to the field of alcoholism, and we regularly receive many publications which are issued by other alcoholism programs throughout the world.

Our present heightened interest in the preventive aspects of the problem of alcoholism has caused us to increase and include many volumes on prevention. We have also acquired more literature about group therapy and group interaction so that staff members may be kept up to date on this study.

J. Motyl

RESEARCH ACTIVITIES

Despite a break in the continuity of directorship, the Research Department continued to function in a satisfactory manner and to grow in terms of depth and breadth of activities.

Mr. R. W. Jones, Director of the department for two years, resigned in March, 1962, to assume the position of Assistant Director, Centre of Alcohol Studies, Rutgers University. Dr. Robert Sommer, Department of Psychology, University of Alberta, filled the chair vacated by Mr. Jones for the summer months. He effectively guided the course of several projects undertaken by various members as well as reporting on things of special interest from his own work. Following Dr. Sommer's return to the University, Dr. David Bell continued as Director of the Research Department.

A third year medical student, Mr. Orest Porayko, was employed for the summer months and worked in Research and Treatment. This, as was the case last year, proved to be most successful. It is hoped that the number of medical students employed in successive years can be increased.

Mr. W. E. Wilby and Mrs. V. Hochachka continued on a full-time basis. Mr. Ron Ramsay, psychology student, and Mr. Jon Whyte, an arts and science student, worked in Research during the summer. Mrs. Rita Aldridge completed her study and retired from the employ of The Foundation to return to University. Two different studies were started in the Medical Departments, one in Calgary and one in Edmonton.

During the past year there were fifteen individual projects completed and reports received. There are four projects actively in progress. These are in addition to the routine statistical reports and continuing internal evaluations.

There is a growing interest in research in the field of alcoholism and The Foundation has been approached for advice and grants-in-aid by interested persons from several different departments of the University, both in Calgary and Edmonton.

D. M. Bell, M.D.

CALGARY CENTRE ACTIVITIES

Statistics elsewhere in this report cover the treatment and educational activities of the Calgary Centre. However, some of the stories behind the statistics indicate the degree of progress made in all areas during the past year.

Foundation staff have continued to be called on to lecture in Calgary's High Schools, at the University of Alberta (Calgary), and at Mount Royal College. A seminar for teenagers in Bowness, Alberta, indicated the interest by this age group in the subject of alcohol. Sponsored by the Bowteen Club, the seminar was instituted by the youngsters themselves, and well supported.

In other educational fields, there is a growing awareness among professional people of the role they can play in treatment of alcoholism. A seminar for agency caseworkers was well attended, and resulted in a number of specific training sessions with agency personnel. The Calgary Police Training School called on The Foundation to speak to both recruits and municipal officers. In the field of medicine, orientation for nurses in training continues on a regular basis, and internes at the Calgary General Hospital attended a series of five lectures on alcoholism. Calgary staff also completed the second eight-week orientation of staff at the Baker Memorial Sanatorium, similar to the one being conducted at the Aberhart Sanatorium in Edmonton.

The Foundation is proud of the many opportunities provided during the past year to work closely with various AA groups. We are particularly pleased to note the quality and strength of the Foothills group at the Calgary Provincial Gaol.

There were also some material signs of Foundation growth in Calgary. Building space was more than doubled by the completion of a new addition to existing quarters. Staff moved into the new facilities at the end of the year. And, in Red Deer, services were expanded to provide a part-time coun-

selling service. Thanks go to the Red Deer Community Advisory Committee and to the Municipal Hospital for making the service possible.

1962 saw the formation of a United Fund in Calgary, which met its financial objective. The Foundation is pleased to have been accepted as one of the participating health agencies in the Fund. Staff in the Calgary Centre continue in their efforts to be worthy of the trust placed in them by Calgarians. Many of them have taken the opportunity to improve their skills and knowledge through special training and additional university courses. The quality of our people is reflected in the number of occasions when Foundation staff are asked to speak to other professional groups.

Foundation information activities depend almost entirely on the co-operation of the various news media for their success. And, we are extremely pleased with the help offered us by the newspapers, radio and television stations, in carrying our message to the public. Of course, Foundation personnel continue to be in demand as speakers to many private and public groups that are interested in learning more about alcoholism.

Looking ahead to 1963, the Calgary Centre anticipates an even busier year. A number of projects started in 1962 will shortly be in force. Negotiations for more positive alcoholism programs are going on with segments of business, commerce, industry and labor. We have also made a proposal to the School Boards to institute a teacher orientation in the Calgary High Schools, which would be conducted on a voluntary basis. It is also hoped to expand opportunities for doctors and clergymen to take advantage of Foundation educational services.

Calgary Centre staff are satisfied that 1962 has been a year of progress and are looking forward to 1963 as a time to further improve our service to the community in which we live.

J. P. Matheson

STATISTICAL HIGHLIGHTS

Table 1: TOTAL FILES OPENED

	1953-1962	1962
Edmonton Centre	3,892	418
Calgary Centre	2,153	328
Other	169	93
Total	6,214	839

Table 2: TOTAL CASE FILES OPENED

	1953-1962	1962
Edmonton Centre	1,426	214
Calgary Centre	848	141
Other	12	9
Total	2,286	364

'Case' status is assigned to patients who persist in treatment to a 'significant' extent (defined as a minimum of four consecutive counselling sessions not more than 7 days apart). Surveys indicate that, on the average, cases receive more than ten interviews and attend a good number of group therapy meetings. Recovery trends are calculated on the basis of case status patient response to treatment. (For standards and methodology see A FIVE YEAR REVIEW.)

Table 3: RECOVERY TRENDS, INCEPTION TO DATE—1962,
EDMONTON AND CALGARY CENTRE CASES COMBINED

		1962
Recovery Indicated 26%	— Very good Recovery	14%
	— Progressive Recovery	12%
Improved 29%	— Partial Recovery	29%
No Recovery Indicated 33%	— Unimproved	28%
	— Other Problems	5%
Active 12%	— Under Treatment	12%

PATIENT DATA

Table 4: SEX

	1961	1962
Male	90.0%	89.3%
Female	10.0%	10.7%

Table 5: MEAN AGE

	1961	1962
Male	40.2 %	39.4 yrs.
Female	37.8 yrs.	39.2 yrs.

The age group distribution of patients during 1962 reveal approximately:

16.5%	age 29 and under
34.5%	age 30 to 39
31.7%	age 40 to 49
17.3%	age 50 and over

Table 6: MARITAL STATUS

	1961	1962
Single	12.2%	14.2%
Married	63.8%	60.6%
Divorced/Separated	21.7%	21.4%
Widowed	2.3%	3.8%

Table 7: VOCATIONAL LEVEL (Regular)

	1961	1962
Professional	4.2%	5.5%
Exec./Man.	10.6%	10.0%
Supervisory	7.2%	6.0%
High Skilled	21.9%	21.7%
Semi-Skilled	35.2%	34.0%
Unskilled	17.7%	17.3%
Housewife	3.2%	5.5%

Table 8: EMPLOYMENT STATUS

	1961	1962
Employed	57.7%	59.0%
Unemployed	42.3%	41.0%

Table 9: SOURCE OF REFERRAL

	1961	1962
General Publicity	24.3%	21.0%
AA	20.0%	17.5%
A.F.A. Patient	18.0%	17.8%
Employer/Supervisor	3.0%	2.1%
Medical	13.9%	16.9%
Clergy	3.9%	4.6%
Legal	2.6%	2.1%
Agency	11.3%	10.4%
Penal	0.6%	0.4%
Other	2.4%	7.2%

Activities by Counselling and Medical staff, with and on behalf of patients are reflected in the following tables:

COUNSELLING ACTIVITIES

	1961	1962
Interviews	8,057	9,533
Group Therapy Sessions	368	657
Group Therapy Attendance	3,585	7,064

MEDICAL ACTIVITIES

	1961	1962
New Patients Seen	341	388
Doctor/Patient Interviews	677	442
Nurse/Patient Interviews	1,554	2,334
Physical Examinations	365	

EDUCATIONAL ACTIVITIES

	1961	1962
Advisory and Training Services	124	165
Other Preventive Services	99	141
Attendance	6,787	7,700
Literature Distributed	20,938	25,809
Periodicals	23,626	24,967

Radio and television stations throughout Alberta have been co-operative about featuring short announcements as well as full-length programs about alcoholism. This has proved a most valuable public information resource.

THE ALCOHOLISM FOUNDATION OF ALBERTA

January 1, 1962 — December 31, 1962

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